

OFFICE OF MUNICIPAL CLERK

RHONDA DAUPHIN JOHNSON, CMC
MUNICIPAL CLERK

April 22, 2004

55 TRINITY AVENUE, S.W.
SECOND FLOOR, EAST
SUITE 2700
ATLANTA, GEORGIA 30335
(404) 330-6033
FAX (404) 658-6103

HERTZ
Attn: Melissa Morehead
P.O. Box 268920
Oklahoma City, OK 73126

04-R-0562

Dear Ms. Morehead:

I sincerely regret that you have been adversely affected by the circumstances raised in your claim for damages against the City of Atlanta. Your time and patience in this matter has been greatly appreciated.

However, I must notify you that the Atlanta City Council Adopted an Adverse Report on your claim at its regular meeting on April 19, 2004. In consultation with the City's Law Department, who conducted an investigation of the situation, the Council has determined that the City cannot accept responsibility for this matter and therefore cannot pay this claim.

If you desire any further information, please contact the **City Attorney's Office/Claims Division** at (404) 330-6400.

Yours very truly,

Rhonda Dauphin Johnson, CMC
Municipal Clerk

cc: Claims Division/Law Department

RCS# 5585
4/19/04
3:03 PM

Atlanta City Council

Regular Session

CONSENT I CONSENT I PG(S) 1-18, EXCEPT:04-R-0538
 04-O-0487 04-R-0473
 ADOPT

YEAS:	14
NAYS:	0
ABSTENTIONS:	0
NOT VOTING:	2
EXCUSED:	0
ABSENT	0

Y Smith	Y Archibong	Y Moore	Y Mitchell
Y Starnes	NV Fauver	Y Martin	Y Norwood
Y Young	Y Shook	Y Maddox	Y Willis
Y Winslow	Y Muller	Y Boazman	NV Woolard

CONSENT I

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 03L0626

Date: March 5, 2004

Claimant /Victim HERTZ

BY:(Ins.Co.) (Atty) _____

Address: P. O. Box 268920, Oklahoma City, OK 73126

Subrogation: _____ Claim for Property damage \$ 2,404.26 Bodily Injury \$ _____

Date of Notice: 05/01/03 Method: Written, proper X Improper _____

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 02/10/03 Place: 3393 Peachtree Road, NE

Department Police Bureau: _____

Employee involved _____ Disciplinary Action: _____

NATURE OF CLAIM: The claimant alleges its vehicle was damaged by the driver of a City vehicle. However, the claimant has withdrawn its claim.

INVESTIGATION:

Statements: City employee _____ Claimant _____ Others _____ Written _____ Oral _____

Pictures _____ Diagrams _____ Reports: Police X Dept Report _____ Other _____

Traffic citations issued: City Driver _____ Claimant Driver _____

Citation disposition: City Driver _____ Claimant Driver _____

BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial _____

Improper Notice _____ More than Six Months _____ Other _____ Damages reasonable _____

City not involved _____ Offer rejected _____ Compromise settlement _____

Repair/replacement by Ins. Co. _____ Repair/replacement by City Forces _____

Claimant Negligent _____ City Negligent _____ Joint _____ Claim Abandoned X

Respectfully submitted,


INVESTIGATOR - DIANNE C. MITCHELL

RECOMMENDATION:

Pay \$ _____ Adverse X Account charged: 1A01 _____ 2J01 _____ 2H01 _____ 2P01 _____

Claims Manager:  Concur/date 03/17/04

Committee Action: _____ Council Action _____

Hertz Police
Rex 8/4/03 Mitchell
08/04/03
DM

04/25/2003

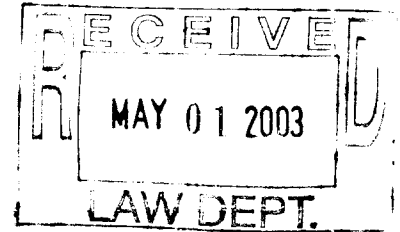
ATLANTA POLICE DEPT
ATTN: CLAIMS DEPT
675 PONCE DE LEON AVE E

The Hertz Corporation
P.O. Box 268920
Oklahoma City, OK 73126

ENTERED - 8-5-03 - SB
03L0626 - DIANNE MITCHELL

ATLANTA GA 30308- -

RE: OUR CASE NUMBER: 01-2003-02188
DATE OF LOSS: 02/10/2003 -00
ACCIDENT LOCATION:
DRIVER OF YOUR VEHICLE: CARLOS A FIGUEROA, JR.



Our investigation of this matter indicates that the Hertz vehicle was damaged as a result of the above noted loss. To date, we have not received payment in our attempts to settle this matter.

If this claim has been forwarded to your insurance carrier, please advise us who is handling your claim, and ask them to contact us regarding the status. In the event that you are handling payment directly, please forward your check or money order immediately for the amount detailed on the enclosed invoice.

Your check should be made payable to "The Hertz Corporation" and indicate your case number on your payment.

Very truly yours,

MELISSA MOREHEAD
RECOVERY SPECIALIST
1-800-654-5667 Ext.6337
(405)775 -6337
mmorehead@hertz.com

Enclosures
T2A-30

04-R -0562

Entered - 08/05/03 - sb
CL03L0626 - DIANNE C. MITCHELL

CLAIM OF: **HERTZ**
P. O. Box 268920
Oklahoma City, OK 73126

04- *R* -0562

For damages alleged to have been sustained as a result of a vehicular accident on February 10, 2003 at 3393 Peachtree Road, NE.

THIS ADVERSE REPORT IS APPROVED

BY: 
JERRY L. DELOACH
DEPUTY CITY ATTORNEY

ADVERSE REPORT

PUBLIC SAFETY &

LEGAL ADMINISTRATION COMMITTEE

DATE: 3/30/04

CHAIR: H. J. Smith

Chad Smith
Chad Smith
Chad Smith

Chad Smith

COUNCIL PRESIDENT PROTEM

APR 19 2004

CERTIFIED

APR 19 2004

CERTIFIED

Paula Davidson
MUNICIPAL CLERK

APR 19 2004

APR 19 2004